PART B - FEE(S) TRANSMITTAL

JUL 2 2 2005	I this form, together wi		or F	Commissioner 1 P.O. Box 1450 Alexandria, Vir	or Patents ginia 22313-1450	should be completed where	
	form should be used for tran correspondence including the d below or directed otherwise ions. ENCE ADDRESS (Note: Use Block 1 for		ders and notif) specifying a				
20350	20350 7590 06/17/2005			Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
TWO EMBARC EIGHTH FLOOI	AND TOWNSEND AI ADERO CENTER R CO, CA 94111-3834	ND CREW, L	LP	I hereby certify that States Postal Service addressed to the Matransmitted to the US	ertificate of Mailing or Tran this Fee(s) Transmittal is beir with sufficient postage for fi all Stop ISSUE FEE address PTO (703) 746-4000, on the	smission g deposited with the United rst class mail in an envelope s above, or being facsimile date indicated below.	
7/25/2005 RMEBRAH1 00000167 201430 09964079					JoAnn Evangelista (Depositor's name)		
				Colorin	Ruangle	(Signature)	
02 FC:1504 300.00	D DA			July, 2	005	(Date)	
03 FQ:8004-PLICATION NO.	FILING DATE		FIRST NAMED	INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/964,079	09/26/2001	·	Robert S.	. Kieval	1071,1104101	2039	
APPLN. TYPE nonprovisional	SMALL ENTITY YES	ISSUE FEE \$700		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE 09/19/2005	
·	nonprovisional				٦	03/13/2003	
EX	EXAMINER		IT	CLASS-SUBCLASS			
OROPEZA, FRANCES P		3762		607-044000			
CFR 1.363). Change of correspondence address (or Change of Correspond Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Cust Number is required.			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
	ND RESIDENCE DATA TO E ess an assignee is identified b n in 37 CFR 3.11. Completion				nee is identified below, the	document has been filed for	
(A) NAME OF ASSIC	GNEE	(B) RESIDENC	E: (CITY and STATE OR CO	OUNTRY)		
CVRx, Inc	•		Maple (Grove, MN 5536	9		
Please check the appropri	ate assignee category or catego				Corporation or other private gr	oup entity Government	
	4a. The following fee(s) are enclosed: 4b. Payment of Fee(s):						
	☐ A check in the amount of the fee(s) is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached.						
	of Copies		_ `	=	charge the required fee(s), or (enclose an extra	credit any overpayment, to copy of this form).	
a. Applicant claims	us (from status indicated above SMALLENTITY status. See	37 CFR 1.27.			ALL ENTITY status. See 37 (
The Director of the USPT NOTE: The Issue Fee and interest as shown by the r	O is requested to apply the Iss I Publication fee (if required) ecords of the United States Pat	ue Fee and Publica will not be accepted ent and Trademark	tion Fee (if and from anyone Office.	y) or to re-apply any previou other than the applicant; a re	sly paid issue fee to the applic gistered attorney or agent; or	ation identified above. the assignee or other party in	
Authorized Signature	X			Date	July , 2005		
Typed or printed name				=	n No29,54		
Alexandria, Virginia 2231	ation is required by 37 CFR 1.3 iality is governed by 35 U.S.C application form to the USPT ons for reducing this burden, sirginia 22313-1450. DO NOT 13-1450.						